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APPLICANTS
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** CONTINUING DATA *****
 This application is a 371 of PCT/EP03/04044 04/16/2003 *AMC 6127/2005*

** FOREIGN APPLICATIONS *****
 ITALY MI2002A000986 05/10/2002 *AMC 6127/2005*

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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no				
Verified and Acknowledged Examiner's Signature <i>Alvin Pinza</i> Met after Allowance <i>AMC</i>				

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TITLE
 Diclofenac-based composition for the topical treatment of oropharyngeal cavity disorders

FILING FEE RECEIVED 1210	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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